

**RECEIVED  
CENTRAL FAX CENTER**

FEB 01 2007



38525 WOODWARD AVENUE, SUITE 2000  
BLOOMFIELD, MICHIGAN 48304  
TELEPHONE: (248) 433-7200  
FACSIMILE: (248) 433-7274  
<http://www.dickinsonwright.com>

---

**FACSIMILE TRANSMITTAL SHEET**

---

**To:** Art Unit 2612  
**Fax:** 1-571-273-8300  
**Subject:** US Application No 10/530,901  
**Date:** 02/01/2007 02:03:11 PM  
**Pages:** 3 , including cover page  
**From:** Kelly, Robert L.  
**E-mail:** RKelly@dickinson-wright.com  
**Phone:** 248-433-7578

---

If you have not received the total number of pages, please call the sender at the above phone number.  
*Thank you.*

**IMPORTANT** - This message is intended solely to be used by the individual or entity to which it is addressed. It may contain information which is privileged, confidential and otherwise exempt by law from disclosure. If the reader of this message is not the intended recipient, or an employee or agent responsible for delivering this message to its intended recipient, you are herewith notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us by telephone immediately and return this communication to us at the above address via the United States Postal Service. *Thank you.*

**RECEIVED  
CENTRAL FAX CENTER**

FEB 01 2007

PTO/SB/122 (01-06)

Approved for use through 12/31/2008. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

**CHANGE OF  
CORRESPONDENCE ADDRESS**  
*Application*

Address to:  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Application Number	10/530,901
Filing Date	4/08/2005
First Named Inventor	John P. Peeters
Art Unit	2612
Examiner Name	
Attorney Docket Number	29343-00001

Please change the Correspondence Address for the above-identified patent application to:

The address associated with  
Customer Number:

59582

OR

Firm or  
Individual Name

Address

City

State

Zip

Country

Telephone

Email

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- Applicant/inventor
- Assignee of record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or agent of record. Registration Number 31,843
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Signature

Typed or Printed  
Name Robert L. Kelly

Date

2/01/2007

Telephone

248-433-7578

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

\*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Certificate of Transmission

I hereby certify that this Change of Correspondence Address form for U.S. Application No. 10/530,901 is being transmitted via facsimile No. **571-273-8300** to the Commissioner for Patents, on **February 1, 2007** by the undersigned.

  
\_\_\_\_\_  
*Susan K. Olson* Susan K. Olson)